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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/749,122-Conf. #3280
	Filing Date	December 30, 2003
	First Named Inventor	Richard L. BOYD
	Title	DISEASE PREVENTION BY REACTIVATION OF THE THYMUS
	Art Unit	1632
	Examiner Name	D. A. Montanari
Attorney Docket No.		0286336.00153US1

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Richard Boyd</i>	Date	16.5.2008
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Title and Company C.S.O. NORWOOD IMMUNOLOGY			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.